MULTIPLE DEPENDENT CLAIM SERIAL NO. FILING DATE FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) **CLAIMS** AFTER AS FILED AFTER I"AMENOMENT AFTER AS FILED 1 MANCHEMENT AFTER I"AMERDMENT IND. 1 MANENDMENT DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. <u>78</u> 5 TOTAL IND T T \$ TOTALECE TOTAL DEF **◆**■ TOTALDEP **√**¤ TOTAL CLABUS U.S. DEPARTMENT of COMMIERCE

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